PTO/SB/17 (10-08)

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.									
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known				
					Application Numb	per 10/53	10/538,730		
FEE TRANSMITTAL				L	Filing Date	June	June 13, 2005		
For FY 2009					First Named Inve	ntor GUE	GUERRET, O.		
					Examiner Name	BERN	BERNSHTEYN, M.		
Applicant claims small entity status. See 37 CFR 1.27					Art Unit	1796	1796		
TOTAL AMOUNT OF PAYMENT (\$) \$810.00					Attorney Docket I	No. FR-A	FR-AM1907NP		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
X Deposit Account Deposit Account Number: 01-2717 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)									
under 37 CFR 1.16 and 1.17									
WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH FEES EXAMINA							TION FEES	3	
Application 1	Type Fe	ю (\$)		Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility		30	165	540	270	220	110	Tool Mr. (e)	
Design		20	110	100	50	140	70		
Plant	_	20	110	330	165	170	85		
Reissue	_	30	165	540	270	650	325		
Provisional	-	20	110	0	0	0	0		
2. EXCESS CLAIM FEES							v	Small Entity	
Fee Description							Fee (\$) 52	Eee (\$)	
	Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							26	
Multiple dependent		r 3 (meiu	ding Keissues)	)			220 390	110 195	
Total Claims		Claims	Fee (\$)	Fee	e Paid (\$)			Dependent Claims	
- 20	ar HP =	X	-	= _			Fee (\$)	Fee Paid (\$)	
HP = highest number				_					
Indep.Claims		Claims	Fee (\$)	Fer	e Paid (\$)				
-3 or HP = X = HP = hishest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  -100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Request for Continued Examination (RCE) 810									
SUBMITTED BY									
Siamature Siamature	0.0 1	-al.		Regist	ration No. 42 110		Telephone	215 410 2214	

than I My (Attorney/Agent) 42,110 Name (Print/Type) Thomas F. Roland Date December 6, 2010

This collection of information is required by 37 CFR 1.138. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and sumfitting the completed application from the USPTO. The will vary depending upon the individual gathering. Industry generate, preparing, on sourning are competed appreciation from the total review of the grounding point the individual case. Any common in the amount of the you require to complete this form and/or suggestions for reducing this budden, should be set for the Chief Individual Commence, P.O. Box 1450, Alexandria, W. 2231-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 4450, Alexandria, W. 2231-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 4450, Alexandria, W. 2231-1450. A VEZ31-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.